PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE MAY 1 5 2006. Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/537795 TRANSMITTAL Filing Date 03/13/2005 First Named Inventor **FORM** Eric Jonsen Art Unit **Examiner Name** 

Attorney Docket Number

(to be used for all correspondence after initial filing)

Tota	al Number of	Pages in This S	Submission	6	Attorney Docket	Number	US02053	33US			
ENCLOSURES (Check all that apply)											
	Fee Transmittal Form Fee Attached  Amendment/Reply After Final Affidavits/declaration(s)  Extension of Time Request Express Abandonment Request Information Disclosure Statement				ENCLOSURES (Check all that apply)  □ Drawing(s) □ Licensing-related Papers □ Petition □ Petition to Convert to a Provisional Application □ Power of Attorney, Revocation Change of Correspondence Address □ Terminal Disclaimer □ Request for Refund □ CD, Number of CD(s) □			Appea of App Appea (Appea Proprio Status Other below)	Enclosure(s) (pleas	o Board ices o TC y Brief)	
Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53  SIGNA				Remai	Landscape Ta		RNEY, O	OR AGE	ENT	- ···	
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Date				06			eg. No.	28,923			
CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with											
sufficie the dat	sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:  Signature										
Typed	or printed i	<sub>name</sub>   $g$ ill l	Peistrup		V				Date	11 may 2	onla l

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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ed to respond to a collection of info	rmation unless it displays a valid OMB control number.
Application Number	10/537,795
Filing Date	03/13/2006
First Named Inventor	Eric Jonsen
Title	Containers Sealed With Flexible
Art Unit	
Examiner Name	
Attorney Docket Number	US020533 US

I hereby revoke all previous powers of attorney given in the above-identified application.								
I hereby appoint:								
Practitioners ass	Practitioners associated with the Customer Number: 28159							
l								
Practitioner(s) n	amed be	ow:						
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		s) to prosecute the application	identified above	, and to transac	ct all busine	ess in the L	Inited States Patent and	
Trademark Office conr	nected the	erewith.						
Please recognize or ch	ange the	correspondence address for t	he above-identif	fied application	to:			
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OR						7		
The address	associat	ed with Customer Number:		28159				
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l am the:								
Applicant/Inventor.								
Assignee of record of the entire interest. See 37 CFR 3.71.								
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature W Buter Yell				Date	5/11/06			
Name	W. Brint	W. Brinton Yorks, Jr.				Telephone	425-487-7152	
Title and Company	Authoriz	ed Appointed Practitioner of A	ssignee, Konink	lijke Philips Ele	ectronics, N	I.V.	····	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total of 1		forms are submitted.						

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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he Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: KONINKLIJKE PHILIPS ELECTRONICS N.V. Filed/Issue Date: \_\_\_ Application No./Patent No.: \_\_\_ Entitled: METHOD AND APPARATUS FOR PREVENTING SEAL FAILURES CAUSED BY POSITIVE PRESSURE INSIDE CONTAINERS SEALED WITH FLEXIBLE FILM Koninlkijke Philips Electronics N.V. corporation (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) (Name of Assignee) states that it is: 1. 📝 the assignee of the entire right, title, and interest; or 2. an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is\_\_\_\_\_ in the patent application/patent identified above by virtue of either: A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached. OR B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below: The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached. The document was recorded in the United States Patent and Trademark Office at \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached. Reel The document was recorded in the United States Patent and Trademark Office at \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached. Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. gignature Reg. #28,923 W. Brinton Yorks, Jr. Printed or Typed Name Telephone Number Authorized Appointed Practitioner of Assignee

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## SOLE/JOINT ASSIGNMENT

For good and valuable consideration, receipt of which is hereby acknowledged, I/we, as a below-named Assignor(s), hereby sell, assign, and transfer the entire and exclusive right, title, and interest in the following to Koninklijke Philips Electronics N.V., having a place of business at Groenewoudseweg 1, 5621 BA Eindhoven, NL, its successors, assigns, and legal representatives, including any nominees (collectively "the Assignee"):

my/our invention relating to METHOD AND APPARATUS FOR PREVENTING SEAL FAILURES CAUSED BY POSITIVE PRESSURE INSIDE RIGID CONTAINERS SEALED WITH FLEXIBLE FILM

## for which

[ ] a U.S. provisional application for patent will be filed in the United States Patent and Trademark Office,

[ X ] a U.S. provisional patent application was filed in the United States Patent and Trademark Office on December 18, 2002 having a Serial Number 60/434,589,

- (2) the foregoing application and all other United States, foreign and international patent applications associated therewith, based thereon, or claiming priority therefrom including, but not limited to, any and all provisionals, non-provisionals divisions, continuations, continuations-in-part, reexaminations, reissues, and extensions thereof, and
- (3) the right to claim priority thereto, and the entire and exclusive right, title, and interest in and to any and all patents granted on these applications.

I/We authorize and request that the Patent Office officials in the United States and in any and all foreign countries to issues any and all Letters Patent when granted, solely to **Koninklijke Philips Electronics N.V.**, for its sole use, and that of its successors, assigns, and legal representatives.

I/we will provide my/our cooperation to enable the Assignee to enjoy the foregoing right, title, and interest to the fullest extent. Upon request at the expense of the Assignee, I/we agree to execute all papers, take all rightful oaths, testify in all legal proceedings including patent prosecutional actions and infringement actions, and do all other such acts which may be necessary, desirable, or convenient for securing and maintaining patents on the foregoing invention or for perfecting title thereto in the Assignee.

I/We certify that I/we have the full right to convey the above rights.

3/18/03	(signature)	, Assignor
Date	(printed name) Eric Jonsen	
	(signature)	, Assignor
Date	(printed name)	
	(signature)	, Assignor
Date	(printed name)	

PTC/SB/50 (11-04)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

Interest application   Interest	I hereby revoke all previous powers of attorney given in the application identified in the attached statement under									
Practitioners associated with the Customer Number:  OR  Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):  Name  Registration Number  Name  Registration Number  Name  Registration Number  Number  Registration Registration Number  Registration Number  Registration Registration Number  Registration Number  Registration Registration Registration Number  Registration Registration Number  Registration Re	37 CFR 3.73(b).									
Practitionar(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):    Name	I hereby a	ppoint:								
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):    Name		Prectitioners associated with the Customer Number: 28159								
Name Registration Number Name Registration Number Registration Number Number  as attorney(e) or agent(e) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and at patent applications assigned and to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:    The address associated with Customer Number:   28159			that are then ten material	non-illegen are to be	comed then a cur	tomer numi	oer must be u	sed):		
as attorney(e) or agent(e) to represent the undereigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned and to the undersigned according to the USPTO assignment records or essignment documents attached to this form in accordance with 37 CFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:	Practi									
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as attorney(e) or agent(e) to represent the undersigned before the United States Peterst and Trademark Office (USPTO) in connection with any and all patent applications assigned goly to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) for the address associated with Cuslomer Number:    Variable   Variable										
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arty and all patient applications assigned and to the understigned according to the USP10 assignment records or assignment documents attached to this form in accordance with 37 GFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 GFR 3.73(b) to:						<del></del>		<b></b>		
arty and all patient applications assigned and to the understigned according to the USP10 assignment records or assignment documents attached to this form in accordance with 37 GFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 GFR 3.73(b) to:										
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Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:    X	any and all r	oatent applicatio	ns assigned <u>only</u> to the unders	ore the United States is igned according to the	atent and Tradema USPTO assignmen	ark Office (l nt records o	JSPTO) in co r assignment	documents		
The address associated with Customer Number:  OR  Firm or Individual Name Address  City State Zip  Country  Telephone Fax  Assignce Name and Address:  KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignce, and must identify the application in which this Power of Attorney is to be filed.  SignATURE of Assignee of Record  The dividual whose significant and title is supplied bolow is authorized to act on behalf of the assignce				tion identified in the at	ached statement u	nder 37 CF	R 3.73(b) to:			
The address associated with Customer Number:  OR  Film or Individual Name  Address  City  Country  Telephone  Fax   Assignce Name and Address:  KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/98 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record  The idividual whose signature and title is supplied bolow is authorized to act on behalf of the assignee										
Firm or Individual Name  Address  City  Country  Telephone  KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/98 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  Signature of Assignee of Record  The dividual whose signature and title is supplied below is authorized to act on behalf of the assignee.	π لکا ⊓	he address asso	clated with Customer Number:	281	9	1	•			
Address  City  Country  Telephone  KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  The dividual whose significant and title is supplied bolow is authorized to act on behalf of the assignee.										
Country  Telephone  KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record  The dividual whose signature and title is supplied below is authorized to act on behalf of the assignee	Individual Name									
Country  Telephone  Fax   RONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/98 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record  The dividual whose signature and title is supplied below is authorized to act on behalf of the assignee	Address									
Assignce Name and Address:  KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record  The dividual whose time for and title is supplied below is authorized to act on behalf of the assignee	City State Zip									
Assignce Name and Address:  KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  Signature of Assignee of Record The dividual whose signature and title is supplied below is authorized to act on behalf of the assignee	Country									
KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record  The dividual whose signature and title is supplied below is authorized to act on behalf of the assignee	Telephone Fax									
KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record  The dividual whose signature and title is supplied below is authorized to act on behalf of the assignee	L									
Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record  The idividual whose signature and title is supplied below is authorized to act on behalf of the assignee	Assignee N	arne and Addres								
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Administration 1 - 11 N. W.E.W. 2011.)										
Name   Michael E. Marion   Telephone (914) 333-9637		Michael	E. Marion		<del></del>					
THE Authorized Representative		1		tive		<del></del>				

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